City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction:	Owner:		Phone:	Permit No:
28 Atlantic Street	Dellahunt/Co		none given	9 9 4
Owner Address: 28 Atlantic Street	Lessee/Buyer's Name: N/A	Phone: N/A	BusinessName: N/A	7 7 h g
	Address: 181 Harriet Stre	· ·		Permit Issued:
Contractor Name:		_	e: ** 799–4272	i crime issued.
**Gregory Curran Past Use:	Proposed Use:	COST OF WOR		<u>E:</u> 2 6 ಸ್ಥಾತ
rasi Use.	Troposed Osc.	\$ 2,500	\$ 42.0	
3 unit	Same	FIRE DEPT. 🗷		
3 diffe	Bame		Denied Use Group:	Type:
		ر ا		Zone: CBL: 016-F-004
Proposed Project Description:				7 1 1 1 1
Proposed Project Description.	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		(1.A.D.) _ 26/001,199	
Rebuild existing entry porch	Action:	Approved	Special/Zone or Reviews:	
Rebuild existing enery poten		Approved with Condition	_ = 0.101014114	
			Denied	□ □ Wetland
		Signature:	Dotos	☐ Flood Zone ☐ Subdivision
Permit Taken By:	Data Applied Fam	Signature.	Date:	☐ Site Plan maj ☐minor ☐mm ☐
KA	Date Applied For:	10-6-99		
				Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				□ Variance
2. Building permits do not include plumbing, septic or electrical work.				☐ Miscellaneous
				☐ Conditional Use☐ Interpretation
3. Building permits are void if work is a tion may invalidate a building perm		i issuance. I aise informa-		□ Approved
tion may invandate a building perm	•	k Up Gregory Cur	ran 700-4272	□ Denied
	odii ioi iie	k op Glegoly Cul	1all /99-42/2	
				Historic Preservation
	□ Not in District or Landmark			
	☐ Does Not Require Review☐ Requires Review			
				in Requires Review
			PERMIT ISSUED	Action:
			PERMIT ISSUED WITH REQUIREMENTS	
	CERTIFICATION			□ Appovea
	ord of the named property, or that the propose			
	plication as his authorized agent and I agree t		•	*
1	ication is issued, I certify that the code official	-		to enter all Date:
areas covered by such permit at any reas	onable hour to enforce the provisions of the	code(s) applicable to such	i permit	
		10 6 00		
	ADDREGG	10-6-99	DIIONE	
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	PERMIT ISSUED
				WITH REQUIREMENTS
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:				
REGIO TOTALE I ENGOTT IT CIT INCL	was in waters and were		1110112.	CEO DISTRICT 1